

FACT SHEET

ASSESSMENT COMPLAINT PERIOD 2015 (for Dec. 2015 - Nov. 2016 tax bills)

Town of Huntington

Assessor's Office

PHONE:

(631) 351-3226

Town Hall 100 Main Street Huntington, N.Y. 11743

The 2015 Tentative Town Assessment Roll may be inspected in the Assessors Office:

Monday - Friday 8:30 am to 4:30 pm, May 1 through May 19, 2015

Special Extended Hours:

Wednesday, May 13th - 8:30 am to 8:00 pm

Saturday, May 16th

9:00 am to 1:00 pm

"GRIEVANCE FORMS WILL NOT BE ACCEPTED BEFORE MAY 1ST!"

Grievance Day - May 19, 2015 (open formal public hearing on assessment complaints) is held between 9:00 am and 8:00 pm at Town Hall. Check in @ Assessor's Office in Room 100. The Board of Review takes a lunch and dinner break.

The deadline to file the complaint form is:

8:00 pm -- May 19, 2015 (Grievance Day)

(The application must be physically delivered to this office by 8:00 p.m. on Tuesday, May 19, 2015. (Timely postmark unacceptable.)

Preliminary Residential Assessment Ratio (R.A.R.) for the Town of

Huntington is:

.73 percent (sales study July '13 – June '14)

Valuation Date:

July 1, 2014

The preliminary level of assessment (equalization rate) for Huntington is: .89 (15/16)

Filing An Assessment Complaint

SUGGESTIONS:

- You are <u>NOT</u> required to personally appear before the Board of Assessment Review (BAR) at the open hearing on Grievance Day (Tuesday May 19, 2015). In 2014, although thousands of complaints were filed, less than fifty people personally appeared before the BAR.
- Fill out the complaint form properly, including:
 - a) property tax map number
 - b) description of property and buildings
 - c) current assessment
 - d) requested new assessment
 - e) MARKET VALUE of property as of JULY 1, 2014 valuation date
 - f) supporting documentation (recent appraisal, recent sales listing agreement, multiple listing ad, recent contract of sale, written explanation of your complaint in your own words, PLENTY OF PICTURES, ESPECIALLY OF YOUR PROPERTY AND HOME etc...

NOTE: If you are ordering a professional appraisal at this time for this purpose only, tell your appraiser that the appraisal "Valuation Date" is July 1, 2014.

- g) **sign** the complaint form
- Make a copy of your completed complaint form <u>before</u> you file the original with this department. Date stamp your copy at the time you file the original. This is your receipt.
- ONLY FOR THOSE WHO MAY WISH TO PERSONALLY APPEAR BEFORE THE BAR ON TUESDAY, MAY 19, 2015:

Hold on to your complaint form until that date -- Do not file it with this department prior to that date as it will be difficult to locate it.

Make FIVE copies of your complaint and supporting documentation so that all five Board members can review the material as you explain your case (only those appearing before the BAR).

The order of complaints before the BAR is on a first-come, first-served basis. This department will issue numbers beginning at 8:30 AM on Tuesday, May 19, 2015. Once you have a number, we will try to approximate the time that you should return to Town Hall. Don't Worry -- If you happen to miss your turn, we will fit you in as soon as possible. Anyone who wishes to personally address the BAR and has received a number by 8:00 PM on Tuesday, May 19, 2015, WILL BE GIVEN THE OPPORTUNITY TO BE HEARD THAT DAY.

 Decisions by the BAR are not rendered on Tuesday, May 19th. You will be notified in late September of the BAR's decision.

* MAKE A COPY FOR YOUR

NEW YORK STATE DEPARTMENT OF TAXATION & FINANCE OFFICE OF REAL PROPERTY TAX SERVICES

COMPLAINT ON REAL PROPERTY ASSESSMENT FOR 20 I

BEFORE THE BOARD OF ASSESSMENT REVIEW FOR

*TAKE Pictures-ATTACh & Explain

RP-524 (3/09)

	(city, town vinage of county)			
PART ONE: GENE	RAL INFORMATION			
(General information and instructions for comp	leting this form are contained tn form RP-524-Ins)			
Name and telephone no, of owner(s)	2. Mailing Address of owner(s)			
IDENTIFY Yourself				
no. ()				
ning no. ()	Email (optional)			
Name, address and telephone no. of representative (if applicable, complete Part Four on page 4.)	ve of owner, if representative is filing application.			
Property location	IDENTIFY YOUR PROPERTY:			
Street Address	Village (if any)			
	Suffolk			
City/Town	County			
Schoo	l District			
	(District - Section - Block - LOT)			
Property identification (see tax bill or assessment	400 - 189 - 6 - 7			
Tax map number or section/block/lot Type of property: Residence	Farm Vacant land			
Commercial	Industrial Other			
escription: 3,000 SQ FT Colon				
2 car garage, .55 acr	······································			
Assessed value appearing on the assessment rol	ll:			
Land \$ 500 Total \$ 50	>			
. Property owner's estimate of market value of pro	perty as of valuation date (see			
astructions)	\$ 625,00			
	and the second			

Focus - Market Value of Subject Property as of July 1, 2014 ("VALUATION DATE")

RP-524 (3/09)

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PART TWO: INFORMATION NECESSARY TO DETERMINE VALUE OF PROPERTY
(If additional explanation or documentation is necessary, please attach)

Information to support the value of property claimed in Part One, item 7 (complete one or more):

1. Purchase price of property: Conly 1	F Tecent) \$ 625,000
a. Date of purchase: 7/5/14	- ATTACH MLS ad , Mortgage Apprais
b. Terms: Cash Contrac	clasing States
	rent-child, in-laws, siblings, etc.): None
d. Personal property, if any, included in purchase	price (furniture, livestock, etc.; attach list and sales
2. Property has been recently offered for sale (at	tach copy of listing agreement, if any):
When and for how long: 1014	to 10/2/14
How offered: MLS Realtor	Asking price: \$ 625,000
3. Property has been recently appraised (attach co	ору): When: <u>7///</u> Ву Whom:
Purpose of appraisal:	Appraised value: \$ 625,000
tor this purpose, te	l appraiser to value
property as of 7/1	12014
5. Buildings have been recently remodeled, cons	tructed or additional improvements made:
Cost \$	Take Pictures of Your home: Property
Date Started:	Date Completed:
Complainant should submit construction cost detail	ls where available.
operating expenses, sales volume and income states	ments.
Explai	in IN Writing ? ATTACH
7. Additional supporting documentation (check i * MAKE SURE to take i ATTO - Write your Complaint IN	ach Pictures of vour home + Property

RP-524 (3/09)

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PART THREE: GROUNDS FOR COMPLAINT A. UNEQUAL ASSESSMENT (Complete items 1-4)

1.	The assessment is unequal for the following reason: (check a or b)
	a The assessed value is at a higher percentage of value than the assessed value of other real property on the
_	assessment roll.
7	b. The assessed value of real property improved by a one, two or three family residence is at a higher
	percentage of full (market) value than the assessed value of other residential property on the assessment
	roll or at a higher percentage of full (market) value than the assessed value of all real property on the assessment roll.
2.	The complainant believes this property should be assessed at
٤.	the following (check one or more):
	a The latest State equalization rate for the city, town or village in which the property is located is%.
→	b. The latest residential assessment ratio established for the city, town or village in which the residential
•	property is located. Enter latest residential assessment ratio only if property is improved by a one, two or three
	family residence .75 %.
	c. Statement of the assessor or other local official that property has been assessed at%.
→	d. Other (explain on attached sheet).
3.	Value of property from Part one #7.
4.	Complainant believes the assessment should be reduced to
	d. Other (explain on attached sheet). Value of property from Part one #7
	assessment is excessive for the following reason(s).
1.	The assected value exceeds the full value of the property.
•	a. Assessed value of property\$ b. Complant and believes that assessment should be reduced to full value of (Part one #7)\$
•	c. Attach list of parcels upon which complainant relies for objection, if applicable.
2.	The taxable assessed value is excessive because of the denial of all or portion of a partial exemption.
	a. Specify exemption (e.g.) and refizer, veterans, Phoebta (Eliaf A)
	b. Amount of exemption same.
	c. Amount granted, if any:\$
	d. If application for exemption was filed, attach copy of application to this complaint.
3.	Improper calculation of transition assessment. (Applicable only in approved assessing unit which has
	adopted in writion assessments.)
	a. Transition assessment
	b. 1120 assessment claimes
	C. UNLAWFUL ASSESSMENT (Check one or more)
The	e assessment is unlawful for the following reason(s):
1.	Property is wholly exempt. (Specify exemption (e.g., nonprofit organization))
2.	Property is entirely outside the boundaries of the city, town, village, school district or special district in
_	which it is designated as being located.
3.	Property has been assessed and entered on the assessment roll by a person or body without the authority to
4	make the entry.
4. 5.	Property cannot be identified from description of tax map number on the assessment roll. Property is special franchise property, the assessment of which exceeds the final assessment thereof as
٥.	determined by the State Board of Real Property Services. Canach copy of State Board certificate.)
	determined by the state board of Real Property Services, take the copy of State Board Certificate.)
	D. MISCLASSIFICATION (Check one)
The	e property is misclassified for the following reason (relevant only in apprayed assessing unit which establish
	nestead and non-homestead tax rates):
	Class designation on the assessment roll:
	Complainant believes class designation should be
2	The assessed value is improperly allocated between homestead and non-homestead real property.
All	ocation of assessed value on assessment roll Claimed allocation
	mestead\$
No	n –Homestead \$

PART FOUR: DESIGNATION OF REPRESENTATIVE TO MAKE COMPLAINT ________, as complainant (or officer thereof) hereby

of such assessing unit.		v	7.1		for entative assessment ro
	-				
Date				Signature of owner	er (or officer thereof)
	DADT	TREATER COL			
I certify that all statements ma	de on this annlic	ation are tro	ERTIFICAT	la ka kama	
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	SIG	N	DAT	E!!	
		• •			
Date		•		Signature of owner	r (or representative)
	PAR	T SIX: ST	IPULATIO:	N	
The complainant (or complain:	ant's corresentation	ve) and see	SECT OF SEC	con decimated by	majority of the board
assessors) whose signatures ap described property on the	usa osovenimi	ivie that the	TO LOVE THAT OCCU	essed value is to be	applied to the above
(Check box if stipulation app	(year) assessmen	TOH: Lan	. D TI	Total \$	
- (our zi suputation app	noves exemption	I III CALEUI	n Part Inree, s	section B.2. or C.1.	}
	/	·			,
Complainant or representative		Assessor			Date
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